

Appendix 2: Review Form 2 (RF2)

NZQHS

NEW ZEALAND QUALITY OF HEALTHCARE STUDY

CONFIDENTIAL

MEDICAL REVIEW FORM (RF2)

DIRECTIONS:

- 1. Complete this form only if RF1 completed by Registered Nurse screeners has identified that a screening criterion is present.*
- 2. Please read RF1 prior to reviewing the medical record of INDEX admission, prior to answering the specific questions on this form.*
- 3. Do not write the patient's name or Health Care User number on this form.*
- 4. "AE" means adverse event.*
- 5. Please print or write responses or notes legibly, in BLUE pen, RED for corrections or deletions.*
- 6. For all questions enter the appropriate number in the corresponding box or circle the appropriate number where indicated.*
- 7. Please return this form to the Chief Reviewer on completion of the Review Session.*

DO NOT FILE IN THE MEDICAL RECORD

IF FOUND RETURN TO THE ADDRESS BELOW

III. CAUSATION

In your best judgement, is there evidence that healthcare management caused the patient's unintended injury? In answering this question, consider the following questions and complete the appropriate boxes.

- | | | | |
|----|---|---|--|
| 4a | Is there a note in the medical record which indicates or suggests that healthcare management caused the injury? | — | 1 = Yes (Suggest AE)
2 = No (Suggest no AE)
3 = Unknown |
| 4b | Is there a note in the medical record which predicts the possibility of an injury from the patient's disease? | — | 1 = Yes (Suggest no AE)
2 = No (suggest AE)
3 = Unknown |
| 4c | Does the timing of events suggest that the injury was related to the treatment? | — | 1 = Likely
2 = Possibly
3 = Unlikely
4 = Unknown |
| 4d | Are there other reasonable explanations for the cause of the injury? | — | 1 = Few competing explanations
2 = Some competing explanations
3 = Many competing explanations
4 = No competing explanations
5 = Unknown |
| 4e | Was there an opportunity prior to the occurrence of the injury for intervention which might have prevented it? | — | 1 = Yes (suggest AE)
2 = Possibly
3 = No (Suggest no AE)
4 = Unknown |
| 4f | Is there recognition that the intervention in question causes this kind of injury? | — | 1 = Widely recognised
2 = Recognised by other specialists
3 = No
4 = Not Applicable
5 = Unknown |
| 4g | Did the adverse event respond to new management to neutralise or modify the effects of former management? | — | 1 = Convincing response (Suggest AE)
2 = Suggestive response
3 = No response (Suggest no AE)
4 = Not Applicable
5 = Unknown |

Consider and answer all of the questions above before continuing

- 4h After due consideration of the clinical details of the patient's management, and your response to the questions above, what level of confidence do you have that the HEALTHCARE MANAGEMENT caused the unintended injury?

SCORE

Confidence Score:

- 1 = Virtually no evidence for management causation. (Then **STOP, NO AE**)
- 2 = Slight to modest evidence for management causation.
- 3 = Management causation not likely; less than 50-50 but close call.
- 4 = Management causation more likely than not, more than 50-50 but close call.
- 5 = Moderate/strong evidence for management causation.
- 6 = Virtually certain evidence for management causation.

SECTION 2

CLASSIFICATION OF ADVERSE EVENT

I. DIAGNOSTIC ERROR

5 Was the adverse event the result of a diagnostic error
(wrong or delayed diagnosis)?

1 = Yes **GO TO QUESTION 5a**
2 = No **GO TO QUESTION 6**



5a If yes to 5 then describe:

5b If yes to 5 choose one of the following that best describes the diagnostic error:

—

ENTER MOST IMPORTANT IN BOX
(You can order others below)

- 1 = There was a failure to take an adequate history and/or physical examination
- 2 = There was failure to employ indicated test.
- 3 = There was failure to act upon results of tests or findings.
- 4 = Inappropriate or outmoded diagnostic tests were used.
- 5 = There was avoidable delay in diagnosis.
- 6 = Doctors or other professionals were practising outside their area of expertise. (specify)

- _____ second most important
- _____ third most important
- _____ fourth most important
- _____ fifth most important
- _____ sixth most important

5c Reasons for error are apparent?

1 = Yes **GO TO QUESTION 5d**
2 = No **GO TO QUESTION 6**



5d If yes to 5 choose one of the following that best describes the most important human cause for the diagnostic error (as chosen in 5b above).

—

- 1 = Lack of knowledge
- 2 = Electively practicing outside area of expertise
- 3 = Misapplication of or failure to apply a rule; or use of a bad or inadequate rule
- 4 = Violation of a protocol or rule
- 5 = Slips and lapses; errors due to “absent mindedness” in activities in which the operator is skilled
- 6 = Complication of, or failure in, technical performance of an indicated procedure
- 7 = Failure to synthesise, decide and / or act on available information
- 8 = Acting on insufficient information
- 9 = Failure to continue established management
- 10 = Lack of care/attention, failure to attend
- 11 = Failure to request or arrange an investigation, procedure or consultation
- 12 = Questionable practice ethics.
- 13 = Other (specify) _____
- 14 = Don't know / can't tell

[5e] Were there other diagnostic errors?

— 1 = Yes **GO TO** QUESTION 5f ↓
2 = No **GO TO** QUESTION 6 ↓

[5f] **If yes to 5e** then describe:

II. OPERATIVE ADVERSE EVENT

[6] Was the AE related to an operation or did it occur during the immediate (30 days) postoperative period?

— 1 = Yes **GO TO** QUESTION 6a ↓
2 = No **GO TO** QUESTION 7 →

[6a] **If yes to 6** select one of the following:

Technical

Non-technical

1 = Technical problem. (specify):

7 = PE

2 = Bleeding. (specify):

8 = CVA

9 = CHF

3 = Wound infection

10 = DVT

4 = Non-wound infection

11 = AMI

5 = Other wound problem. (specify):

12 = Pneumonia

6 = Other technical (specify):

13 = Other non-technical. (specify):

[6b] Choose one of the following that best describes the adverse event.

1 = The operation was inefficacious (failed to relieve symptoms).

2 = The patient was inadequately prepared before the operation.

3 = There was avoidable delay in treatment.

4 = There was inadequate monitoring/supervision of the patient after the operation.

5 = Doctors or other professionals were practising outside their area of expertise. (specify):

6 = Inappropriate or outmoded forms of therapy were used.

7 = None of these apply.

[6c] **If yes to 6** choose one of the following that best describes the human cause for the performance error. _____

- 1 = Lack of knowledge.
- 2 = Electively practicing outside area of expertise.
- 3 = Misapplication of or failure to apply a rule; or use of a bad or inadequate rule.
- 4 = Violation of a protocol or rule.
- 5 = Slips and lapses; errors due to "absentmindedness" in activities in which the operator is skilled.
- 6 = Complication of, or failure in, technical performance of an indicated procedure.
- 7 = Failure to synthesise, decide and/or act on available information.
- 8 = Acting on insufficient information.
- 9 = Failure to continue established management.
- 10 = Lack of care/attention, failure to attend.
- 11 = Failure to request or arrange an investigation, procedure or consultation.
- 12 = Questionable practice ethics.
- 13 = Other (specify): _____
- 14 = Don't know / can't tell.

[6d] Were there other operative problems? _____

1 = Yes
2 = No

[6e] **If yes to 6d** (specify): _____

[6f] Were there other performance errors? _____

1 = Yes
2 = No

III. FRACTURES (Includes non-operative treatment)

[7] Was the adverse event related to the management of a fracture? _____

1 = Yes
2 = No **GO TO QUESTION 8** ↓

[7a] **If yes to 7** indicate the type of fracture _____

[7b] **If yes to 7** indicate one of the following: _____

- 1 = Re-do (specify): _____
- 2 = Prosthesis fracture (specify) _____
- 3 = Operative care (specify) _____
- 4 = Non-operative care (specify) _____
- 5 = Other (specify) _____

[7c] **If yes to 7** choose one of the following that best describes the human cause for the fracture: _____

- 1 = Lack of knowledge.
- 2 = Electively practicing outside area of expertise.
- 3 = Misapplication of or failure to apply a rule; or use of a bad or inadequate rule.
- 4 = Violation of a protocol or rule.
- 5 = Slips and lapses; errors due to "absentmindedness" in activities in which the operator is skilled.
- 6 = Complication of, or failure in, technical performance of an indicated procedure.
- 7 = Failure to synthesise, decide and/or act on available information.
- 8 = Acting on insufficient information.
- 9 = Failure to continue established management.
- 10 = Lack of care/attention, failure to attend.
- 11 = Failure to request or arrange an investigation, procedure or consultation.
- 12 = Questionable practice ethics.
- 13 = Other (specify): _____
- 14 = Don't know / can't tell.

IV. ANAESTHESIA RELATED INJURY

[8] Was the adverse event related to anaesthesia? _____

1 = Yes

2 = No **GO TO QUESTION 9** ↓[8a] **If yes to 8** indicate the operation involved: _____[8b] **If yes to 8** indicate one of the following:

1 = Intubation. _____

2 = Anaesthetic agent complication. _____

3 = Equipment failure. _____

4 = Preop assessment. _____

5 = Other. (specify): _____

[8c] **If yes to 8** choose one of the following that best describes the human cause for the anaesthetic related injury. _____

1 = Lack of knowledge. _____

2 = Electively practicing outside area of expertise. _____

3 = Misapplication of or failure to apply a rule; or use of a bad or inadequate rule. _____

4 = Violation of a protocol or rule. _____

5 = Slips and lapses; errors due to “absentmindedness” in activities in which the operator is skilled. _____

6 = Complication of, or failure in, technical performance of an indicated procedure. _____

7 = Failure to synthesise, decide and/or act on available information. _____

8 = Acting on insufficient information. _____

9 = Failure to continue established management. _____

10 = Lack of care/attention, failure to attend. _____

11 = Failure to request or arrange an investigation, procedure or consultation. _____

12 = Questionable practice ethics. _____

13 = Other. (specify): _____

14 = Don't know / can't tell. _____

V. OBSTETRIC RELATED INJURY (Maternal)

[9] Was the adverse event related to obstetric management? _____

1 = Yes

2 = No **GO TO QUESTION 10** →[9a] **If yes to 9** indicate at what stage the AE occurred. _____

1 = Antenatal. _____

2 = Labour and/or Delivery. _____

3 = Post-partum. _____

[9b] Describe the contributing factors to the adverse event: _____

[9c] **If yes to 9** choose one of the following that best describes the human cause for obstetric related injury. _____

1 = Lack of knowledge. _____

2 = Electively practicing outside area of expertise. _____

3 = Misapplication of or failure to apply a rule; or use of a bad or inadequate rule. _____

4 = Violation of a protocol or rule. _____

5 = Slips and lapses; errors due to “absentmindedness” in activities in which the operator is skilled. _____

6 = Complication of, or failure in, technical performance of an indicated procedure. _____

7 = Failure to synthesise, decide and/or act on available information. _____

8 = Acting on insufficient information. _____

9 = Failure to continue established management. _____

10 = Lack of care/attention, failure to attend. _____

11 = Failure to request or arrange an investigation, procedure or consultation. _____

12 = Questionable practice ethics. _____

13 = Other. (specify): _____

14 = Don't know / can't tell. _____

[9d] MODE OF DELIVERY

- 1 = Normal Vaginal Delivery.
- 2 = Instrument Assisted Delivery.
- 3 = Caesarean Section.

—

VI. NEONATAL RELATED INJURY

[10] Was the adverse event a neonatal unintended injury?

- 1 = Yes
- 2 = No **GO TO QUESTION 11** ↓

—

[10a] If yes to 10 indicate one of the following:

- 1 = Conduct of Delivery.
- 2 = Pre-Delivery Assessment.
- 3 = Post-Delivery Care.
- 4 = Other. (specify): _____

—

[10b] If yes to 10 describe the contributing factors to the adverse event: _____

[10c] If yes to 10 choose one of the following that best describes the human cause for neonatal related injury.

- 1 = Lack of knowledge.
- 2 = Electively practicing outside area of expertise.
- 3 = Misapplication of or failure to apply a rule; or use of a bad or inadequate rule.
- 4 = Violation of a protocol or rule.
- 5 = Slips and lapses; errors due to “absentmindedness” in activities in which the operator is skilled.
- 6 = Complication of, or failure in, technical performance of an indicated procedure.
- 7 = Failure to synthesise, decide and/or act on available information.
- 8 = Acting on insufficient information.
- 9 = Failure to continue established management.
- 10 = Lack of care/attention, failure to attend.
- 11 = Failure to request or arrange an investigation, procedure or consultation.
- 12 = Questionable practice ethics.
- 13 = Other (specify): _____
- 14 = Don’t know / can’t tell.

—

VII. PROCEDURE RELATED INJURY

[11] Was this a procedure-related (Non-surgical) unintended injury (such as endoscopy or cardiac catheterisation)?

- 1 = Yes
- 2 = No **GO TO QUESTION 12** →

—

[11a] If yes to 11 select one of the following:

—

Technical

1. = Technical problem. (specify):

2. = Bleeding. (specify):

3. = Wound infection

4. = Non-wound infection

5. = Other wound problem. (specify):

6. = Other Technical. (specify):

Non-technical

7. = PE

8. = CVA

9. = CHF

10. = DVT

11. = AMI

12. = Pneumonia

13. = Other Non-technical.(specify): _____

[11b] Choose one of the following that best describes the adverse event: _____

- 1 = The procedure was inefficacious (failed to relieve symptoms).
- 2 = The patient was inadequately prepared before the procedure.
- 3 = There was avoidable delay in treatment.
- 4 = There was inadequate monitoring of the patient after the procedure.
- 5 = Doctors or other professionals were practising outside their area of expertise (specify) _____

- 6 = Inappropriate or outmoded forms of therapy used.
- 7 = None of these apply.

[11c] **If yes to 11**, choose one of the following that best describes the human cause for the performance error: _____

- 1 = Lack of knowledge.
- 2 = Electively practicing outside area of expertise.
- 3 = Misapplication of or failure to apply a rule; or use of a bad or inadequate rule.
- 4 = Violation of a protocol or rule.
- 5 = Slips and lapses; errors due to "absentmindedness" in activities in which the operator is skilled.
- 6 = Complication of, or failure in, technical performance of an indicated procedure.
- 7 = Failure to synthesise, decide and/or act on available information.
- 8 = Acting on insufficient information.
- 9 = Failure to continue established management.
- 10 = Lack of care/attention, failure to attend.
- 11 = Failure to request or arrange an investigation, procedure or consultation.
- 12 = Questionable practice ethics.
- 13 = Other. (specify): _____
- 14 = Don't know / can't tell.

[11d] Were there other procedure-related problems? _____

1 = Yes
2 = No **GO TO QUESTION 11f** ↓

[11e] **If yes to 11d** (specify): _____

[11f] Were there other performance errors? _____

1 = Yes
2 = No

VIII. DRUG RELATED INJURY

[12] Was this a drug related unintended injury? _____

1 = Yes
2 = No **GO TO QUESTION 13** →

[12a] **If yes to 12** then describe: _____

[12b] What was the drug?

- | | |
|------------------------------|------------------------------|
| 1 = antibiotic. | 9 = antihypertension. |
| 2 = antineoplastic. | 10 = antidepressant. |
| 3 = anti-seizure. | 11 = antipsychotic. |
| 4 = diabetes. | 12 = anticoagulant. |
| 5 = cardiovascular. | 13 = potassium. |
| 6 = antiasthmatic. | 14 = Other. (specify): _____ |
| 7 = sedative or hypnotic. | 15 = analgesic. |
| 8 = peptic ulcer medication. | 16 = antiinflammatory. |

[12c] Name of drug: _____

[12d] Total number of drugs taken at the time of the adverse event _____

[12e] Describe the drug's side effect: _____

[12f] Would a doctor using reasonable medical judgement prescribe the drug, even with knowledge beforehand that this side effect could occur? _____ 1 = Yes
2 = No

[12g] Choose one of the following that best describes the drug related injury: _____

1 = The AE resulted from an error in the method of use or dose.

2 = There was failure to recognise possible antagonistic or complementary drug-drug interaction.

3 = There was inadequate monitoring of drug levels or other inadequate follow-up.

4 = The drug was used inappropriately.

5 = There was avoidable delay in treatment.

6 = Doctors or other professionals were practising outside their area of expertise.(specify): _____

7 = None of these apply.

8 = Other. (specify): _____

[12h] **If yes to 12** choose one of the following that best describes the human cause for the drug treatment error:

1 = Lack of knowledge.

2 = Electively practicing outside area of expertise. _____

3 = Misapplication of or failure to apply a rule; or use of a bad or inadequate rule.

4 = Violation of a protocol or rule.

5 = Slips and lapses; errors due to "absentmindedness" in activities in which the operator is skilled.

6 = Complication of, or failure in, technical performance of an indicated procedure.

7 = Failure to synthesise, decide and/or act on available information.

8 = Acting on insufficient information.

9 = Failure to continue established management.

10 = Lack of care/attention, failure to attend.

11 = Failure to request or arrange an investigation, procedure or consultation.

12 = Questionable practice ethics.

13 = Other. (specify): _____

14 = Don't know / can't tell.

[12i] Were there other drug treatment errors? _____ 1 = Yes
2 = No

IX. THERAPEUTIC ERROR

[13] Was this a therapeutic error (e.g. correct diagnosis but inappropriate therapy or delay in treatment)? _____ 1 = Yes
2 = No **GO TO QUESTION 14** ↓

[13a] **If yes to 13** then describe:

X. FALLS

[14] Was the unintended injury caused by a fall? _____ 1 = Yes
2 = No **GO TO QUESTION 15** →

[14a] **If yes to 14** describe the circumstances: _____

SYSTEM ERROR

Although you may have answered YES to one of the previous Adverse Event Classifications, you may also answer YES to question 15 and classify the type of system error.

[15] Was the unintended injury the result of a system error? _____

1 = Yes
2 = **No GO TO QUESTION 16**



[15a] If yes to 15 choose one of the following to describe the system error: _____

1 = The AE resulted from defective equipment or supplies. (specify): _____

2 = The AE resulted because equipment or supplies were not available. (specify): _____

3 = There was inadequate reporting or communication. (specify): _____

4 = There was inadequate training or supervision of doctors or other personnel. (specify): _____

5 = There was a delay in the provision or scheduling of services (e.g. lab tests, x-rays or follow-up visits). (specify): _____

6 = There was inadequate staffing. (specify): _____

7 = There was inadequate functioning of hospital services (e.g. pharmacy, blood bank or housekeeping). (specify): _____

8 = No protocol / failure to implement protocol or plan. (specify): _____

9 = Can't tell / or other. (specify): _____

[15b] Were there any other system errors? _____

1 = Yes
2 = No

[15c] If yes to 15b then describe: _____

[15d] Was the patient receiving limited care as defined by DNR status? _____

1 = Yes
2 = No
3 = Unable to tell

[15e] Was the patient involved in an experimental protocol? _____

1 = Yes
2 = No
3 = Unable to tell

HEALTHCARE MANAGEMENT

[16] Where did the healthcare management causing the AE occur? (choose one)

OUTSIDE HOSPITAL:

1 = Doctor's office.

2 = Ambulatory care unit (include. day surgery) outside hospital.

3 = Home.

4 = Home, labour and delivery.

5 = Rest home.

6 = Private hospital.

7 = Other site outside of hospital. (specify) _____

INSIDE HOSPITAL:

8 = Patient's hospital ward.

9 = Operating theatre.

10 = ICU.

11 = Emergency department.

12 = Ambulatory care unit (include. day surgery) inside hospital.

13 = Recovery room.

14 = Labour and delivery.

15 = SCBU.

16 = Radiology department.

17 = Cardiac catheter lab.

18 = Occupational therapy / physiotherapy department.

19 = Pathology department.

20 = Laboratory (clinical).

21 = Blood bank.

22 = Pharmacy.

23 = Hospital bathroom.

24 = Service area (stairs, halls, elevator).

25 = Procedure room.

26 = Other site inside hospital. (specify) _____

[17] SPECIALTY responsible for AE (choose one):

SURGERY

1 = Anaesthesiology.

2 = Cardiac surgery.

3 = Colon / Rectal surgery.

4 = General surgery.

5 = Gynaecology.

6 = Neurosurgery.

7 = Obstetrics.

8 = Orthopaedic surgery.

9 = Paediatric surgery.

10 = Plastic surgery.

11 = Thoracic surgery.

12 = Vascular surgery.

13 = Urological surgery.

14 = Ophthalmology.

15 = Otorhinolaryngology.

16 = Other. (specify) _____

MEDICINE

- | | |
|---------------------------------|-----------------------------|
| 17 = Emergency. | 28 = Nephrology. |
| 18 = Dermatology. | 29 = Neurology. |
| 19 = Endocrinology. | 30 = Pathology. |
| 20 = Family Practice. | 31 = Paediatrics. |
| 21 = Gastroenterology. | 32 = Physical Medicine. |
| 22 = Haematology. | 33 = Psychiatry. |
| 23 = Immunology and Allergy. | 34 = Respiratory Medicine. |
| 24 = Infectious disease. | 35 = Radiation Therapy. |
| 25 = Intensive Care Unit (ICU). | 36 = Radiology. |
| 26 = General Medicine. | 37 = Rheumatology. |
| 27 = Medical Oncology. | 38 = Other. (specify) _____ |

OTHER

- | | |
|--------------------------------|---------------------------------------|
| 39 = Dentistry / Oral Surgery. | 45 = Occupational Therapy. |
| 40 = Dietary. | 46 = Physiotherapy. |
| 41 = Hospital Physical Plant. | 47 = Podiatry. |
| 42 = Midwifery. | 48 = Transportation Support Services. |
| 43 = Nursing. | 49 = Speech / language Therapy. |
| 44 = Pharmacy. | 50 = Other. (specify) _____ |

SECTION 3

DISABILITY

[18] Was a portion of, or the entire hospitalisation, due to the adverse event?

1 = No increase in hospital days. —

2 = Portion of hospital stay.

3 = Entire hospital stay.

[19] How many days in hospital are attributable to the AE? _____ DAYS

[20a] Would the patient at some time be able to return to pre-hospital state with regard to employment, independence and leisure? _____

1 = Yes

2 = No

[20b] What was the degree of disability attributable to the adverse event over and above the patient's disability from the underlying disease as REPORTED in the record?

1 = Minimal impairment and/or recovery in one month.

2 = Moderate impairment, recovery in one to six months. —

3 = Moderate impairment, recovery in six months to a year.

4 = Permanent impairment, disability 1–50%.

5 = Permanent impairment, disability >50%.

6 = Permanent nursing.

7 = Institutional care.

8 = Death.

9 = Cannot tell from the medical record.

[20c] Based on evidence in the medical record, how would you JUDGE the degree of disability attributable to the adverse event? _____

1 = Minimal impairment and/or recovery in one month.

2 = Moderate impairment, recovery in one to six months.

3 = Moderate impairment, recovery in six months to a year.

4 = Permanent impairment, disability 1–50%.

5 = Permanent impairment, disability >50%.

6 = Permanent nursing.

7 = Institutional care.

8 = Death.

9 = Cannot reasonably judge.

[21] When did the Healthcare management and the consequent AE occur in relation to the index hospitalisation? _____

1 = Healthcare management occurred during index hospitalisation; AE discovered during index hospitalisation

2 = Healthcare management occurred in outpatient treatment prior to index hospitalisation; AE indication for hospitalisation or first discovered during index hospitalisation.

3 = Healthcare management occurred during hospitalisation at any institution prior to index hospitalisation; AE indication for hospitalisation or first discovered during index hospitalisation.

4 = Healthcare management occurred during index admission; AE discovered in subsequent hospitalisation.

SECTION 4**PREVENTABILITY**

Consider and evaluate the following questions before making a judgement of preventability.

[22] Is there consensus about diagnosis and therapy regarding this case?

1 = Very little.

2 = Some.

3 = A great deal.

—

[22a] How complex was the case?

1 = Very complex.

2 = Moderately complex.

3 = Uncomplicated.

—

[22b] Was the management in question appropriate?

1 = Definitely appropriate.

2 = Probably appropriate.

3 = Possibly inappropriate.

4 = Definitely inappropriate.

—

[22c] What was the co-morbidity of the case in which the adverse event occurred?

1 = Very ill patient.

2 = Moderately ill patient.

3 = No co-morbidity.

—

[22d] What was the degree of deviation of management from the accepted norm?

1 = Little.

2 = Moderate.

3 = Severe.

—

[22e] What was the degree of emergency in management of the case prior to the occurrence of the adverse event?

1 = Critical and very urgent.

2 = Moderate.

3 = Not urgent.

—

[22f] What potential benefit was associated with the management?

1 = Life-saving.

2 = Major quality of life.

3 = Minor quality of life.

4 = Not applicable.

—

[22g] What was the chance of benefit associated with the management?

1 = High.

2 = Moderate.

2 = Low.

4 = Not applicable.

—

[22h] What was the risk of an adverse event related to the management?

1 = High.

2 = Moderate.

3 = Low.

4 = Not applicable.

—

[22i] On reflection, would a reasonable doctor or health professional do this again?

1 = Definitely would.

2 = Probably would.

3 = Probably would not.

4 = Definitely would not.

—

[23] Rate on a 6 point scale your confidence in the evidence for preventability.

Confidence Score:

- 1 = Virtually no evidence for preventability.
- 2 = Slight to modest evidence for preventability.
- 3 = Preventability not very likely; less than 50-50 but close call.
- 4 = Preventability more likely than not; more than 50-50 but close call.
- 5 = Strong evidence for preventability.
- 6 = Virtually certain evidence for preventability.

Score

If you scored 1, proceed to Question 28.

If you scored 2 OR MORE, answer the following questions:

[24] Please describe briefly the manner in which the AE was preventable, including any efforts, strategies that could have prevented it, in this instance.

[25] What was the reason for the failure to prevent? _____

- 1 = Failure to take adequate history or physical examination.
- 2 = Failure to take precautions to prevent accidental injury.
- 3 = Failure to check equipment, drugs, etc.
- 4 = Failure to employ indicated tests.
- 5 = Failure to act upon results of the findings or tests.
- 6 = Use of inappropriate or outmoded diagnostic tests.
- 7 = Avoidable delay in diagnosis.
- 8 = Avoidable delay in treatment.
- 9 = Inappropriate or outmoded forms of therapy used.
- 10 = Patient inadequately prepared before procedure / operation.
- 11 = Inadequate monitoring / supervision / follow-up of the patient.
- 12 = Doctor or other professional practising outside area of expertise. (specify): _____
- 13 = Other prevention error. (specify): _____

[26] In the final analysis, was this an error of commission or omission? _____

- 1 = Commission (incorrect treatment or management).
- 2 = Omission (failure to diagnose or treat)

[27] To which area should efforts be directed to prevent recurrence?
(You may circle more than one)

- 1 = New, better, or better implemented policies or protocols
- 2 = Better access to or transfer of information
- 3 = Communication (describe) _____
- 4 = Discharge procedures and protocols
- 5 = Changes in organisation management
- 6 = Changes in organisation culture
- 7 = Better record-keeping
- 8 = Other system areas not listed above (describe) _____
- 9 = More or better personnel
- 10 = More or better equipment or other physical resources
- 11 = Other resources not listed in 9 or 10 above (describe) _____
- 12 = Credentialling
- 13 = Education
- 14 = Retraining
- 15 = Quality assurance
- 16 = Consultation with specialists or peers
- 17 = Don't know / can't tell
- 18 = Other (give details) _____

[28] Was there a comment in the medical records indicating a need for follow-up as a result of this injury? (You may circle more than one)

- 1 = No.
- 2 = Rehabilitation.
- 3 = Counselling.
- 4 = Psychiatric.
- 5 = Routine Clinical.
- 6 = Other (specify): _____

[29] Did the patient have any follow-up as a result of this injury? (You may circle more than one)

- 1 = No.
- 2 = Rehabilitation.
- 3 = Counselling.
- 4 = Psychiatric.
- 5 = Other. (specify): _____
- 6 = Information not available.

SECTION 5

MEDICAL RECORD DOCUMENTATION

[30] In what areas was the medical record unable to provide answers to questions in this form? (Please circle)

- 1 = None, whole medical record adequate to provide answers to questions.
- (**OR** circle one or more of the following:)
- 2 = Initial medical assessment.
- 3 = Medical progress notes.
- 4 = Nursing notes.
- 5 = Procedure documentation.
- 6 = Reports.
- 7 = Discharge.
- 8 = Other (specify): _____

[31] Reviewer's judgements limited or hampered by lack of subspecialty knowledge (Mark **Yes** if you think a specialist's review is necessary)

____ 1 = Yes
2 = No

[31a] **If YES** to question 31, which specialty? (list as many as necessary)

